

O I P E J C / 1 / 1
JUL 28 2003
U.S. PATENT AND TRADEMARK OFFICE

2131 #11
PTO/SB/21 (6-98) 10-23-03

Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/898,319	
	Filing Date	July 2, 2001	
	First Named Inventor	SMITH et al.	
	Group Art Unit	2131	
	Examiner Name	Unassigned	
Total Number of Pages in this Submission	2	Attorney Docket Number	020699-000310US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawings	<input type="checkbox"/> Appeal Communication to Board of Appeals and interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Confirmation postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
RECEIVED JUL 28 2003 Technology Center 2100		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Charles J. Kulas, Reg. No. 35,809
Signature	
Date	7-23-03

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to **Commissioner for Patents, Arlington, VA 22313-1450** on this date: 7-23-03

Name (Print/Type)	Erica L. Canonizado
Signature	
Date	23 July 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send fees and completed forms to the following address: Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450.



**CHANGE OF
CORRESPONDENCE ADDRESS**
Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/898,319
Filing Date	July 2, 2001
First Named Inventor	SMITH et al.
Group Art Unit	2131
Examiner Name	Unassigned
Attorney Docket Number	020699-000310US

Please change the Correspondence Address for the above-identified application to

Customer No: 37490

RECEIVED

JUL 29 2003

Technology Center 2100

Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed.
- Attorney or agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Typed or
Printed Name Charles J. Kulas, Reg. No. 35,809

Signature

Date

7-23-03

Telephone 650-842-0300

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.